ART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

maintenance fee notification	below or directed otherwise ns. CE ADDRESS (Note: Use Block 1 for		a) specifying a	Note: A certificate	of mailing can only be used for	or domestic mailings of the			
24998 7590 09/22/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
DICKSTEIN SH	APIRO MORIN & C	SHINSKY L	LP	C	ertificate of Mailing or Trans	emiceion			
2101 L STREET N WASHINGTON, I		OIP	E se	I hereby certify that States Postal Service addressed to the M transmitted to the US	this Fee(s) Transmittal is being with sufficient postage for fir ail Stop ISSUE FEE address SPTO (703) 746-4000, on the control of the sufficient of the suf	g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.			
2/15/2004 SFELEKE2 00	0000240 10665153	DEC 14	2004			(Depositor's name)			
FC:1501	1400.00 0	p \ <u>B</u>	25/ 25/			(Signature)			
FC:1504 FC:8001	300.00 D		at of			(Date)			
APPLICATION NO.	FILING DATE	MADE	EKST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
10/665,153	09/22/2003		Akihiro Tanaka		R2184.0118/P118-A	5786			
TITLE OF INVENTION: L	ENS ACTUATOR				,				
₩									
<u> </u>									
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	onal NO		* 5 <u>1400</u>	\$300	\$1630-	12/22/2004			
EXAM	INER .	ART UNIT		CLASS-SUBCLASS		• .			
EDUN, MOI	IAMMAD N	2655 369-044140		369-044140					
FR 1.363),	e address or indication of "Fe ence address (or Change of	`	(1) the nan	ting on the patent front page, nes of up to 3 registered pate OR, alternatively,	ent attorneys 1 Morir	stein Shapiro 1-& Oshinsky			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)		`			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appe I a substitute f	ear on the patent. If an assignment.	mee is identified below, the de	ocument has been filed for			
(A) NAME OF ASSIGNI	E E	(В) RESIDENCI	E: (CITY and STATE OR CO	OUNTRY)				
• •	pany, Ltd.			, Japan					
		ries (will not be pri	inted on the pa	utent): 🗖 Individual 🔯 (Corporation or other private gro	oup entity Government			
The following fee(s) are	enclosed:		Payment of F	* -					
Issue Fee Publication Fee (No. 5)	mall entity discount name: !#-			n the amount of the fee(s) is e					
Advance Order - # of	mall entity discount permitte	a)	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to						
·	Сорись		Deposit Acco	unt Number $04-107$	3 (enclose an extra co	credit any overpayment, to oppy of this form).			
	(from status indicated above								
	MALL ENTITY status. See 3		☐ b. Applica	int is no longer claiming SMA	ALL ENTITY status. See 37 CF	R 1.27(g)(2).			
OTE: The Issue Fee and Puerest as shown by the reco	s requested to apply the Issu iblication Fee (if required) w rds of the United States Pate	e Fee and Publicat rill not be accepted nt and Trademark	tion Fee (if any I from anyone Office.	 or to re-apply any previous other than the applicant; a rej 	sly paid issue fee to the applica gistered attorney or agent; or th	tion identified above. e assignee or other party in			
Authorized Signature	mas	K	*			2004			
Typed or printed name	Mark J. Tho	conson			n No. 33,082				
is collection of information application. Confidentialit	n is required by 37 CFR 1.31 by is governed by 35 U.S.C.	1. The information 122 and 37 CFR 1	n is required to	obtain or retain a henefit hy	the public which is to file (and minutes to complete, including	by the USPTO to process)			

Ti submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FEE TRANSMITTAL
For FY 2005

(Reflects USPTO filing fees in effect from 12/__/04)

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,709.00

Complete if Known						
Application Number	10/665,153-Conf. #5786					
Filing Date	September 22, 2003					
First Named Inventor	Akihiro Tanaka					
Examiner Name	M. N. Edun					
Art Unit	2655					
Attomey Docket No.	R2184.0118/P118-A					

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)				
	lit Card	$\overline{\Box}$	ey Order	2. EXTRA CLAIM FEES				Small Entity
X Deposit Account		None		Fee Description		Fee (\$)	2	Fee (\$)
Deposit Account 04-1073 Number			Each claim over 20		50		25	
Deposit Dickstein Shapiro Morin &			Each independent claim over 3		200		100	
Name Oshinsky LLP			J	Multiple dependent claims		360		180
The Director is hereby authoriz X Charge fee(s) indicated	For Reissues, each claim over more than in the original pa	50		25				
Charge fee(s) indicated Charge any additional fe	For Reissues, each independent claim more than in the original patent 200				100			
X under 37 CFR 1.16 and 1.17 X Credit any overpayments to the above-identified deposit account.				Total Claims Ex 7 - 20 =	tra Claims	Fee (\$)	_ <u>F</u>	Fee Paid (\$) 0.00
Other (please identify):				Indep. Claims Ex	tra Claims	Fee (\$)	F	ee Paid (\$)
FEE CALCULATION				4 -4=		. x		0.00
1. BASIC FILING FEE Small Entity			Multiple Dependent Claims	<u> </u>	Fee (\$)	_F	ee Paid (\$)	
Fee Description	Fee (\$)	Fee (\$)	Fee Paid (\$)				_	
Utility Filing Fee	300	150			Su	btotal (2)	\$_	0.00
Design/Design CPA Filing Fee	200	100		3. OTHER FEES		Small Entity		
Plant Filing Fee	200	100		Fee Description	Fee (\$)	Fee (\$)		Fee Paid
Reissue Filing Fee	300	150		1-month extension of time	120	60		
Provisional Filing Fee	200	100		2-month extension of time 4		225		
1a. ADDITIONAL FILING FEES		3-month extension of time 1		510				
Utility Search Fee	500	250		4-month extension of time	1,590	795		
Design Search Fee	100	50		5-month extension of time 2,		1,080		
Plant Search Fee	300	150		Information disclosure stmt. fee	180	180		
Reissue Search Fee	500	250		37 CFR 1.17(q) processing fee		50		
Utility Examination Fee	200	100		Non-English specification 130		130	_	
Design Examination Fee	130	65		Notice of Appeal 500		250		
Plant Examination Fee	160	80		Filing a brief in support of appeal 500		250		
Reissue Examination Fee	600	300		Request for oral hearing 1,000		500		
Application Size Fee, each 250 125			Other: 8001 Printed copy of patent w/o color				9.00	
addt'l 50 sheets > 100 sheets				Other: 1504 Publication fee for early, voluntary,				300.00
Subtotal (1) and (1a.) \$ 1,400.00					Su	btotal (3)	\$_	309.00
SUBMITTED BY		//						
Signature ///	170	/	$\overline{}$	Registration No. (Attorney/Agent) 33,082	Telepho	ne (202	2) 77	5-4742

Signature Registration No. (Attorney/Agent) 33,082 Telephone (202) 775-4742

Name (Print/Type) Mark J. Thronson Date December /4, 2004